

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00530766       </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M / D D / Y Y Y Y Y Y            06 / 11 / 2020         </div>	

Full Name of Payee <b>Tradewinds Consulting, Inc.</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y            06 / 09 / 2020         </div>	
Mailing Address 21850 Inglewood Ct.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1131.55         </div>	
City State Zip Code Ashburn VA 20148	<b>Transaction ID : SE.17903</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y            06 / 09 / 2020         </div>		
Purpose of Expenditure Printing / Production / Postage (estimate)	Category/Type	Name of Federal Candidate TILLIS, THOM R. SEN., , ,	
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           1131.55         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Tradewinds Consulting, Inc.</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y            06 / 09 / 2020         </div>	
Mailing Address 21850 Inglewood Ct.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">           1131.55         </div>	
City State Zip Code Ashburn VA 20148	<b>Transaction ID : SE.17904</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">           M M / D D / Y Y Y Y Y Y            06 / 09 / 2020         </div>		
Purpose of Expenditure Printing / Production / Postage, orig. rptd. as est. on amend. Form24 filed 7/20/20, this is actual	Category/Type	Name of Federal Candidate CUNNINGHAM, CAL, , ,	
		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
<div style="display: inline-block; border: 1px solid black; padding: 2px;">           2263.10         </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         2263.10       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         _____       </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">         2263.10       </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020

Signature